STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS DEPARTMENT OF BUSINESS REGULATION

Commercial Licensing 233 RICHMOND STREET PROVIDENCE, RI 02903 (401) 222-2416

ESCROW DEPOSIT TRANSMITTAL FORM

Instructions: The broker or salesperson must transmit a signed original of this form to the General Treasurer's Office. (NOTE: include Licensee's address and telephone). A copy of this form must be sent to the Department of Business Regulation, Real Estate Section, 233 Richmond Street, Providence, RI 02903.

In accordance with R.I. Gen. Laws § 5-20-5-26, the enclosed check in the amount o \$is being transferred to the R.I. General Treasurer to be held in trust until the parties to the transaction can resolve the dispute regarding the deposit for real estate which is the subject of a purchase and sales agreement dated The Deposit was held for 180 days by the listing agency			
		Parties have not agreed to extend the agreement pursua	Date of Original Deposit nt to which the deposit is being held.
		Property Address	
Description of Property (Plat No. & Lot No.)			
Name & Address of Seller	Telephone No		
Name & Address of Listing Real Estate Agency Name of Seller's Agent(s) Name of Principal Proker of Agency			
5	License No.		
Name of Finicipal Broker of Agency			
Errors & Omissions Insurance Carrier			
Errors & Omission Policy Number and Effective Date			
Federal Tax ID No.			
Name & Address of Buyer	Telephone No		
Name & Address of Buyer's Agent, if applicable			
, , , , , , , , , , , , , , , , , , ,	License No		
Name & Address of Cooperating Agency, if applicable			
Name of Cooperating Agent	License No		
Errors & Omissions Insurance Carrier			
Policy Number & Effective Date			
Federal Tax ID No.			
DATE:			
	Signature of Principal Broker		
Broker License Number			

Revised 6/23/02